FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)								
Cole, Erin, , ,								
(b) Address (number and street) Check if address changed PO Box 1219				2. Candidate's FEC Identification Number H8NY27127				
(c) City, State, and ZIP Code					s N	lew	Amend	ded
Lockport NY 14095					ment 🗶 (I	N) OR	(A)	
4. Party Affiliation	5. Office Sought		6. State & Dist	rict of Candi	date			
DEMOCRATIC PARTY	House		NY	27				
DE	ESIGNATION OF PR	INCIPAL	CAMPAIGN		ITTEE			
7. I hereby designate the following na	med political committee as m	ny Principal (Campaign Comn	nittee for the	e <u>2018</u> (year of ele	electio	n(s).	
NOTE: This designation should be	filed with the appropriate office	ce listed in th	ne instructions.					
(a) Name of Committee (in full) Erin Cole for Congr	ess							
(b) Address (number and street) PO Box 1219								
(c) City, State, and ZIP Code								
Lockport			NY	1409	5			
 8. I hereby authorize the following nar candidacy. NOTE: This designation should be (a) Name of Committee (in full) 				nmittee, to re	eceive and ex	xpend funds	on behalf of m	ıy
(b) Address (number and street)								
(c) City, State, and ZIP Code								
I certify that I have exa	amined this Statement and to	the best of	my knowledge a	nd belief it is	s true, correc	t and comple	ete.	
Signature of Candidate				Date				
Cole, Erin, , , [Electronically Filed]				07/19/2017				
NOTE: Submission of false, erroneous	s, or incomplete information n	nay subject t	he person signir	ng this State	ment to pena	alties of 2 U.S	S.C. §437g.	
						FE0	C FORM 2 (REV. 02	2/2009)